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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Kuracina et al.	)	
	)	Art Unit: Unknown
Serial No.: 09/846,706	)	
	)	Examiner: Unknown
Filed: 04/30/2001	)	
	)	
For: NEEDLE TIP GUARD FOR	)	
PERCUTANEOUS ENTRY NEEDLES	)	
	)	

INFORMATION DISCLOSURE STATEMENT  
PURSUANT TO 37 C.F.R. SECTION 1.97

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir/Madam:

Pursuant to 37 C.F.R. § 1.97, the following Information Disclosure Statement is submitted as listed on form PTO-1449 enclosed herewith in duplicate. Copies of all disclosure documents are attached hereto for the Examiner's review.

No representation is made that the references disclosed herein legally constitute prior art, or that more relevant references are not available. The disclosure documents enclosed herewith and listed on the attached form (PTO-1449) are printed in the English language and/or accompanied by an Abstract published in the English language.

The references listed herein, when taken alone or in combination are not believed to disclose nor make obvious the invention as claimed in the subject application.

As this Information Disclosure Statement is being submitted before the stipulated three months from the filing date of the application and/or before the mailing of a first Office Action, it is believed that no fee is required. If a fee is required, please charge Account Number 19-4330.

Respectfully submitted,

Dated: 7/16/01  
Customer No. 007663

By:



Matthew A. Newboles  
Registration No. 36,224  
STETINA BRUNDA GARRED & BRUCKER  
75 Enterprise, Suite 250  
Aliso Viejo, CA 92656  
(949) 855-1246



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PTO/SB/21 (6-98)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/846,706
	Filing Date	04/30/2001
	First Named Inventor	THOMAS C. KURACINA
	Group Art Unit	UNKNOWN
	Examiner Name	UNKNOWN
Total Number of Pages in This Submission		Attorney Docket Number INJEC-016C1

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Charge Any Additional Fee Required, to Deposit Account No. 19-4330 <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69 and Accompanying Petition) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) ( <i>please identify below</i> ):  FORM 1449; 32 PRIOR ART PATENTS; CERTIFICATE OF MAILING AND RETURN RECEIPT POSTCARD.
REMARKS:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	MATTHEW A. NEWBOLES
Signature	
Date	7/16/01

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 7/16/01			
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2. INFORMATION DISCLOSURE STATEMENT;
3. FORM 1449 (IN DUPLICATE);
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